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I hereby appoint:								
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OR 58907								
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):								
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		:						
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with								
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents								
attached to this form in accordance with 37 CFR 3,73(b).								
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:								
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Assignee Name and Address:								
Round Rock Research LLC 26 Deer Creek Lane								
Mount Kisco, NY 10549								
A STATE OF THE STA								
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of								
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.								
SIGNATURE of Assignee of Record								
<u> </u>	The	individual whose signature	and title is suppli	ed below is a	authorized to	act on b	chalf of the assign	nee
Signati		6/Mas	meni	2	Date (	2/1	2/10	
Name	bhrلر	M. Desmarais			Telephor	ne	914-66	66-5086

President

Title